



Income Statement Basic Health

If you have asked us (on page 2 of your application) to base your premium on your average income, and you cannot provide a federal income tax return, please read and complete this page.

Instructions: Please enter the amount **you** earned or received for the last 3 or more months. For instance, if you are applying in August we need at least the months of May, June and July completed. You must enter a figure **in each of the past 3 months (or more)** if you want us to average your income. If you have months with **no income**, enter a zero for that month. You must also include your most recent 30 days' pay stubs and/or proof of any income received in the past 30 days.

Month	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Applicant Earnings												

Use the next chart to enter **earnings for your spouse**. See instructions above.

Month	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Spouse Earnings												

If you or your spouse have entered zero income ("0") for any of the months, please state how you supported yourselves below:

Applicant and spouse must **both** sign and date below. I declare, under penalty of perjury, the information I have provided on this form is true, correct, and complete to the best of my knowledge.

_____Applicant _____Spouse



_____ Date